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CONFIRMATION NO. 6160

SERIAL NUMBER 09/893,982	FILING DATE 06/29/2001 RULE	CLASS 345	GROUP ART UNIT 2671	ATTORNEY DOCKET NO. 219.40022X00
APPLICANTS Peter L. Doyle, Dorado Hills, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/16/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 24
INDEPENDENT CLAIMS 5				
ADDRESS 020457				
TITLE Method and apparatus for determining logical texture coordinate bindings				
FILING FEE RECEIVED 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 6160

SERIAL NUMBER 09/893,982	FILING DATE 06/29/2001 RULE	CLASS 345	GROUP ART UNIT 2676	ATTORNEY DOCKET NO. 219.40022X00
APPLICANTS Peter L. Doyle, Dorado Hills, CA;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/16/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 24 INDEPENDENT CLAIMS 5
ADDRESS Blakely Sokoloff Taylor & Zafman LLP 12400 Wilshire Boulevard Seventh Floor Los Angeles ,CA 90025				
TITLE Method and apparatus for determining logical texture coordinate bindings				
FILING FEE RECEIVED 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	